

POSITION	ID NO.	DATE
CLASSIFIER	10	6-10-97
EXAMINER	811	9-12-97
TYPIST	911	9-12-97
VERIFIER	911	9-12-97
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

### INDEX OF CLAIMS

Claim	Date
1	5-11-98
2	5-11-98
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4	5-11-98
5	5-11-98
6	5-11-98
7	5-11-98
8	5-11-98
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SYMBOLS

✓ Rejected

□ Allowed

- (Through numeral) Canceled

+ Restricted

N Non-elected

I Interference

A Appeal

O Objected

Claim	Date
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